## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VOTE 2 REDUCE DEBT (V2RD)	C C00563064
	0 000000
Check if 24-hour report X 48-hour report New report Ame	ends report filed on/// Y Y Y Y Y Y Y Y Y
Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination
	08 24 2014
Mailing Address 14001C Saint German Dr	Amount
Ste 353  City State Zip Code	6029.59
City State Zip Code Centerville VA 20121	6928.58  Transaction ID : SE.4520
Purpose of Expenditure Veter ID Cell Centers Category/	Date of Disbursement or Obligation
Voter ID Call Centers Type	
Name of Federal Candidate	Support Office Sought: House District:
THOMAS COTTON C	Oppose President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 6928.58	Disbursement For: Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
ccAdvertising	08 / D D / Y Y Y Y Y 2014
Mailing Address 14001C Saint German Dr	Amount
Ste 353	
City State Zip Code	1071.42
Centerville VA 20121	Transaction ID : SE.4521  Date of Disbursement or Obligation
Purpose of Expenditure Voter ID Call Centers  Category/ Type	M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
· ·	Support Office Sought: House District:
THOMAS COTTON	Oppose President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 25700.00	Disbursement For: Primary ☐ General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported her with, or at the request or suggestion of, any candidate or authorized committee c party committee) any political party committee or its agent.	
STEVE REITER [Electronically Filed]	Date 08 26 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
VOTE 2 REDUCE DEBT (V2RD)	C C00563064	
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
Sperry Van Ness/ArkBest Realty Inc.	08 / 24 / 2014	
Mailing Address 724 Garland St	Amount	
City State Zip Code	2700.00	
Little Rock AR 72201	Transaction ID : SE.4524 Date of Disbursement or Obligation	
Purpose of Expenditure Office Space Rental  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: House District:	
THOMAS COTTON Oppose	President Senate State: AR	
Calendar Year-To-Date Per Election for Office Sought  Disbut 24628.58  Disbut 2014	ursement For: Primary X General  Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
The Political Network	08 24 2014	
Mailing Address 225 East 85th St	Amount	
Ste 306		
City State Zip Code  New York NY 10028	4503.51 Transaction ID : SE.4525	
Purpose of Expenditure Telecommunications Equipment Rental  Category/ Time	Date of Disbursement or Obligation  M M J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Туре		
THOMAS COTTON	e Sought: House District:	
Орроѕе	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbute 2014	ursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	7203.51	
(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURES	7203.31	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
[Electronically Filed] Date 0	8 26 2014	
Signature		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VOTE 2 REDUCE DEBT (V2RD)	C C00563064
Check if 24-hour report X 48-hour report New report Amends report file	d on
Full Name of Payee  Jebb Young	Date of Public Distribution/Dissemination
Mailing Address 4200 Calion Hwy	08 / 24 / 2014
4200 Callon Hwy	Amount
City State Zip Code	15000.00
El Dorado AR 71730	Transaction ID : SE.4523  Date of Disbursement or Obligation
Purpose of Expenditure Contract Labor for State Election Consulting  Category/ Type	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
THOMAS COTTON Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought  Dist 21928.58	oursement For: Primary X General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Jebb Young	08 24 2014
Mailing Address 4200 Calion Hwy	Amount
City State Zip Code El Dorado AR 71730	7500.00 Transaction ID : SE.4522
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Contract Labor for State Election Consulting  Type	08 22 2014
Name of Federal Candidate Support Office	ce Sought: House District:
THOMAS COTTON Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought  Disl 201	oursement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	22500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	37703.51
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
[Electronically Filed] Date	08 26 2014
Signature	